<b>State of Minnesota</b>	District Court
County	Judicial District:
	Court File Number:
	Case Type:
Petitioner / Plaintiff	_
and / vs	Affidavit of Service
Respondent / Defendant	
STATE OF MINNESOTA	
COUNTY OF	_
(County where Affidavit signed)	
I.	being sworn, state that I am at least 18
(Name of person who hand delivered or mailed docum	, being sworn, state that I am at least 18
years of age having been born on	, and that on
	(Date of Service)
I served the following documents, namely _	(Title of Documents hand delivered or mailed)
upon (check one)	(Title of Documents hand delivered of maned)
Petitioner / Plaintiff Responde	ent / Defendant
Service was done as follows: (check all that app	alv)
Personal service: By handing a true and	correct copy of the documents to
Mail service: By mailing a true and corr	rect copy of the documents by first class mail to
	at his/her last known address
at:	
street address city and depositing the envelope with sufficient	state zip code postage, in the U.S. Mail at a postal box located in
1 0	, State of
Dated:	Signature (Sign only in front of notary public or court administrator.)
g / gg 1: g	Name:
Sworn/affirmed before me this	Address:
day of	City/State/Zip:
	Telephone: ()
Notary Public \ Deputy Court Administrator	· ————————————————————————————————————

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